

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 046884-5519-00-US-232060																									
Application Number 10/594,907		Filed August 7, 2008																									
For LASER PROCESSING METHOD FOR CUTTING SUBSTRATE AND AND LAMINATE PART BONDED TO THE SUBSTRATE																											
Art Unit 2895		Examiner M. Jung																									
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.																											
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																											
<table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 40%;"></th><th style="width: 15%; text-align: center;"><u>Fee</u></th><th style="width: 15%; text-align: center;"><u>Small Entity Fee</u></th><th style="width: 30%;"></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: center;">\$150</td><td style="text-align: center;">\$75</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: center;">\$560</td><td style="text-align: center;">\$280</td><td>\$ 560.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: center;">\$1270</td><td style="text-align: center;">\$635</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: center;">\$1980</td><td style="text-align: center;">\$990</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: center;">\$2690</td><td style="text-align: center;">\$1345</td><td>\$ _____</td></tr></tbody></table>					<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$150	\$75	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$560	\$280	\$ 560.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1270	\$635	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1980	\$990	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2690	\$1345	\$ _____
	<u>Fee</u>	<u>Small Entity Fee</u>																									
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$150	\$75	\$ _____																								
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$560	\$280	\$ 560.00																								
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1270	\$635	\$ _____																								
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1980	\$990	\$ _____																								
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2690	\$1345	\$ _____																								
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																											
<input type="checkbox"/> A check in the amount of the fee is enclosed.																											
<input checked="" type="checkbox"/> Payment by credit card.																											
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																											
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0573</u> .																											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																											
I am the <input type="checkbox"/> applicant/inventor.																											
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).																											
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>56,994</u>																											
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____																											
_____ /Nikolaus P. Schibli/ Signature		_____ April 9, 2012 Date																									
_____ Nikolaus P. Schibli Typed or printed name		_____ 202.842.8800 Telephone Number																									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																											
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																											